

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		2	877-01
RESPONSE FORMALITY REVIEW	14 Kc	1019	09-14-07
		1019	03-01-02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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